

WDMPD Citizen Police Academy Application
West Des Moines Police Department
250 Mills Civic Parkway / West Des Moines, IA 50265 / (515) 222-3333

PLEASE PRINT CLEARLY

NAME: _____
 Last First Middle

D.O.B.: _____ E-Mail _____
 Month / Day / Year

ADDRESS: _____ SEX: _____
 Street Apt# City Zip M/F

SOCIAL SECURITY NUMBER: _____ SHIRT SIZE: _____

Home Phone: _____ Cell Phone: _____ Work phone: _____

Have you ever been arrested for any offense other than a traffic violation? No _____ Yes _____

If Yes, what for? _____

When? _____ Where? _____

What do you expect to gain from attending this Academy?

IN CASE OF EMERGENCY CONTACT:

I hereby certify that the information contained in this application is true and complete to the best of my knowledge. You are hereby authorized to make any investigation of my personal history deemed necessary for consideration to attend the West Des Moines Citizen Police Academy.

Signature of Applicant

Date

Mail completed application form to the address at top of this page or e-mail to
jeff.hartshorn@wdm.iowa.gov.

Refer questions to Officer Jeff Hartshorn 222-3333